File with: lowa Ethics and Campaign Disclosure Board



5633880804

IA ETHICS AND

610 E, 12", Ste. 1A		DAI	IPAIGN DISC	CLOSURE 35
Des Moines, Iowa 50319 Fax: 515-281-4073	FOR INSTRUCTIONS, SEE BACK OF FOR DISCLOSURE SUMMARY PA	er e	711074 11100	recount ju
COMMITTEE NAME (Must be	e same as on Statement of Organization)	20	109 OCT 21	AM 10: 02
Mee Ker fo			FORM	1
	of committee you are reporting for:		DR-2	DISCLOSURE
(1)Statewide/Legislative/Judge !	Standing for Retention Candidate (2) State PAC (3) State Part 5) County Candidate (6) City Candidate (7) School Board or C	y Mae Political	(Rev. 07/2007)	REPORT
Subdivision Cendidate (8)Coun 11) Local Ballot Issue	ty PAC (9) City PAC (10) School Board or Other Political Sub	division PAC (	Comm. #	hy .
CANDIDATE COMMITTEES				
Candidate Name	Political Party (if an	(pricable)		
Office Sought	District /# Sanata o	r House)		
Alderman	AT LAIGE		,	
Late reports are subject to possi	ble civil and criminal penalties. Pursuant to lowa Code section	ns 66B.32A(7) and	66A.401(3), the ca	andidate, for a
	26	سرمرمسرد		17-500
SIGNATURE OF PERSON FIL	ING PERDET TELEPHO	<u>365</u>	20 00	1260/
SIGNATURE OF PERSON FIL	ING REPORT	146	DATES	GNED
I AM FILING A	REPORT FOR (1)	ELECTION (2)NO	N-ELECTION YE	AR.
(n	port date)	ndicate by # 1		
CHECK IF AMENDMENT T	O REPORT DATED	Local C	ommittees, enter Da	ite of Election
		No	V 32	009
	ation) report and attach Notice of Dissolution Form DR-3, of file reports until a DR-3 is filed.)	County:	& Local Committees	, enter County In
<b>(</b> , - a		Which E	SCOLL	
CTATEM	ENT OF CASH ON HAND			
		_		
committee. This emr	ning of the reporting period. (Total of all funds held by the bunt MUST be the same as the cash on hand at the end eriod or must be zero if this is first report filed.)		s	43.86
ADD TOTAL MONE	TAKEN IN THIS PERIOD			4395.00
Schedule A: Cash C	ontributions total (Attach Schedule A) (*also see in-kind t	oelow)		4395.00
Schedule F: Loans F	Received total (Attacti Schedule F)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Schedule H: Total Si	ales of Campaign Property (Attach Schedule H)		<u>- ,                                   </u>	
<u>(Şchedule I</u>	applies to Candidates' Committees Only)			nnada
	SUB-	TOTAL	\$	4438.82
SUBTRACT TOTAL	MONEY SPENT THIS PERIOD			01000
·	itures total (Attach Schedule B) (**also see debts and log	•	<del> </del>	2681.54
Schedule F: Loan Re	spayments total (Attach Schedule F)			1.751.28
CASH ON HAND at the end of	this reporting period (if final report balance must be zero	)	\$ <u></u>	1,751.28
"UNPAID BILLS (From Sched	tule D - Attach Schedule D)	,	\$	0
"IN KIND CONTRIBUTIONS (I	From Schedule E - Attach Schedule E)	,,		0
COUTSTANDING LOANS (Fr	om Schedule F - Attach Schedule F)		\$	0
CONSULTANT BREAKDOWN	•	,	YES _X	NO
CANDIDATE COMMITTEES O	DNLY:	•		_
VALUE OF CAMPAIGN PROF	PERTY (From Schedule H - Attach Schedule H)	!	s	0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

#### For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same a	s on Statemen	t of Organization)
Meeker For	17Y	-OUNCIL

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS	
	CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IDWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibite the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/15	ID# CK#	Barron Curtis 2119 E. 47# St. Dauenport Ia, 52807		\$200	
9/12	CK#	Gary MoHR 4755 School House Rd. Bettendorf Ia. 52722		25	
9/12	CK#	Robert Jackson 2305 Windsor Ct. Davenport In 52807		50	
9/11	ID#	Linda Greeniee 815 MT. Vernon Dr. Dauenport, Ia 52866		100	
9/11	CK#	DAN Huber 4709 Spring Davenport, Iq. 52807		100	
9/11	ID#	Richard Bittner 201 W. 200 ST. Davenport In. 52801		100	
9/11	CK#	Gene Rettenmaier 6509 Stone haven Ct. Davendort Ta. 52807		200	
9/12	ID#	Larry Minard 2743 ELM Davenport Ia, 52803	,	50	
9/12	ID# CK#	Peter Schlicksup 3824 Lorton que. Davenport, Iq. 52807		50	
9/15	ID# CK#	JOHN ATNOID 2574 George Washington Blu Davenport In. 52803	1	100	
<del></del>			SUB-TOTAL	\$ 975	

TOTAL (if last page of this schedule)

Page \_\_\_\_\_ of \_\_\_\_\_ for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

## For instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds)

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5633880804

COMMITTEE NAME (Must be same as o	n Statement of Organization)
Meeker For	CITY COUNCIL

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS	
	CHECK THIS BOX IF AMENDING FORM	

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if epplicable)	AMOUNT RECEIVED	√ IF FOF FUND- RAISER INCOME
9/14	ID# CK#	Fran Carrol 1733 Eastmere Davendort Ia 52803		\$ 50	
9/16	ID# CK#	Mike Guidici 2712 E. 40# St. Dave Noort In 52807	i <b>s</b>	200	
9/15	CK#	Kenneth Koupal 15 Eagle Point Lane Rapid City ILL: 61278		100	
9/16	D#   CK#	Jack Bruchman 104 River Dr. Bettendorf La.52722		25	
9/16	CK#	John Blong 5016 564 Ave. Ct. Bettendorf Iq. 52722		200	
9/16	ID# CK#	Michael Vondran 2714 E 40±6 Davendort Ia.52807		100	
9/16	CK#	WILLIAM BURESS 5306 W. 11th St Davenport Ta 52804		100	
9/18	ID# CK#	Richard Cousins 4528 Telegraph Rd. Davenport Ia, 52804		50	
9/18	ID# CK#	STEPHEN SCHAIK 310 MAIN St. Davenport Fa.52801		250	
	ID# CK#	The state of the s			

TOTAL (if last page of this schedule)

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 5

# For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (MU	st be sen	e as on Statem	ent of Organization)	$\neg$
Meerer	For	CITY	COUNCIN	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC (DENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DO/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
9/15	CK#	David Samuelson 4011 Belle Avc. Davenport Ta 52807		\$ 50	
9/15	CK#	Thomas Rudbeck Do.Box Davenport Ia,52804		200	
9/15	ID# CK#	Jim THOMSON 2604 E. 40# St. Davenport Ta. 52807		100	
9/15	ID#	Tom Freiburger 4226 E. 58# ST. Davenport Ta. 52807		25	
9/15	ID# CK#	philip Trisse / 4576 Amber CT. Bettendorf In 52722		25	
9/15	ID# CK#	Gregory Gowey 4703 Spring Davenport Ia.52807		20	
9/15	ID# CK#	Mark Kilmer 2345 Fairhaven Davenport Ta,52803		50	
9/15	ID# CK#	Hovey Tinsman 3541 Kimberly Davenport Ia 52807		50	
9/15	ID# CK#	Joe Slavens 2101 Gretchen Ct. Bettendorf Ta,52722		50	
9/15	ID# CK#	Mark Schwab 7010 Nottingham LN. Rettendorf Ia, 52722		50	
	·		SUB-TOTAL	\$ 620	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If surmarne of contributor is the sarrie as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 3 of 5 (for Schedule A)

TOTAL (if last page of this schedule)

#### For instructions, See Back of Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same a	s on Statement of Organization)
Meeker For City	4 COUNCIL

5633880804

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 688.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
9/27	ID# CK#	Cal Werner 25370 E Valley Dr. Bettendorf Ia. 52722		\$ 50	
9/27	CK#	Pauline Wulf 1814 E. 35th Ct. Davenport Ia 52807		200	
9/27	ID# CK#	Jim Sims 2708 294 St Bettendorf Ca. 52722		150	
9/27	CK#	Georgia Lógan 1202 Lauralls Southlake Tx. 52803		150	
9/30	ID# CK#	Bill Wilke 3547 Deer Ridge Ct. Bettendorf Ia, 52722		25	
9/30	ID#	mike Duffey P.O. Box 451 Davenport Ia.52808		100	
10/3	ID#	Duane Truman 2214 E 4855 St. Davenport Ia,52807		50	
10/4	CK#	Kenneth Croken 29 Hillcrest Davenport Ia. 52803		50	
10/4	ID# CK#	Chris Rayburn 1821 Pinacre ave. Bettendorf Ia.52803		50	
10/4	ID# CK#	Jeffrey Helms 5 Lombard Ct. DaoeNport Ia. 52803		100	
		TOTAL (If last page	SUB-TOTAL  of this schedule)	\$ 925	

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#### For instructions, See Back of Form

### CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Meeker For City Council

5633880804

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
9/27	ID#	Caroline Ruhl 233 Fernwood Daoenpart Ia. 52803		\$ 100	
9/27	CK#	JOHN ROCHE 2309 WYNNEWOOD Davenport I4.52807		50	
9/27	ID# CK#	Ralph Henniger 101 w. 2 M St. Davenport Ia. 52801		50	
9/27	ID# CK#	Donald Decker 2240 Hogan CT. Bettendorf In 52722		300	
9/27	CK#	Robert Karwath 2303 5.2826 St Davenport Ia.52803		25	
9/27	ID#	Jim Patto N 1024 W. 3 ED St Daoenport Ia, 52802		100	
9/27	CK#	Marlin Volz 2304 WYNNE WOOD Ct. Davenport Ia. 52807		50	
9/27	ID# CK#	Dudley Hanson 3812 N. Thorn wood Dave Nport In 52806		25	
9/21	CK#	Bob Martin 3111 Fernwood Davenport Ia 52807		50	
9/25	CK#	JoHN Liljeguist 5245 Shawnee Or. Davenport Ta. 52804		50	
<del> </del>			SUB-TOTAL	- J'MA	

TOTAL (if last page of this schedule)

Page for Schedule A)

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COMMITTEE NAME (Must be same as on Statement of Organization)

FOR INSTRUCTIONS, SEE BACK OF FORM

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	##46.5 hours   18
Reset	Frian H
. 1/0261	TULLE H

# EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLLIMIN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES	
CHEC	CK THIS BOX IF NDING FORM	

City COUNCIL Meeker For AMOUNT PURPOSE NAME AND ADDRESS TO WHOM CANDIDATE EXPENDED (DESCRIBE TRANSACTION) EXPENDITURE ID NUMBER DATE (Disbursement) WAS MADE (if applicable) AND PAC EXPENDED (MM/DD/YR) CHECK NUMBER Printing mail ID# Davenport Printing Co. Cards 104 Western Day 52801 Direct Mail Bullseye Direct Mail service 5101Tremont Davenport TA. 52807 DAVENPORT POST OFF 4018 N. MARQUETTE Postage Davenport Ia. 52807 OFFICE MAX 320 W Kimberly Labels 14 22 Davenport In 52806 Printing Thenk you Cards Darenport Printing 137 38 104 Western DAUENPORTIZE 52801 Direct mail Service Bullseye Direct Mail 5101 Tremont Davenport In 5280 Yostage Gene Meeker 2306 Windsor Ct CK# Dave Nort Ta52807 ID#

TOTAL (if last page of this schedule)

SUB-TOTAL

\$687.54

THIS BOY APPLIES TO CAMBIDATES' COMMITTEE	

CK#

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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